

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)

David N Cicilline

(b) Address (number and street)

702 Elmgrove Ave

☐ Check if address changed

2. Identification Number

H0RI01073

(c) City, State and ZIP Code

Providence

RI

02906

3. Is This Statement

☒ New (N)

OR

☐ Amended (A)

4. Party Affiliation

DEMOCRATIC PARTY

5. Office Sought

House

6. State & District of Candidate

RI

01

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)

The Cicilline Committee

(b) Address (number and street)

118 North Main St, Suite 2

(c) City, State and ZIP Code

Providence

RI

02903

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Jared Polis Majority Fund

(b) Address (number and street)

PO Box 1174

(c) City, State and ZIP Code

Springfield

VA

22151

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

Signature of Candidate

David N Cicilline

Date

05/18/2011

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--	--

DESIGNATION OF OTHER AUTHORIZED COMMITTEES**[ADDITIONAL]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Rhode Island Victory

(b) Address (number and street)

118 N Main St
SUITE 2

(c) City, State and ZIP Code

PROVIDENCE

02903
